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APPLICANTS

Kirt Debique, Seattle, WA;
 Robin C.B. Speed, Hampshire, UNITED KINGDOM;
 C. Alan Ludwig, Renton, WA;
 Geoffrey T. Dunbar, Kirkland, WA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY WA	SHEETS DRAWINGS 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 7
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No					

ADDRESS

MICROSOFT CORPORATION
 ONE MICROSOFT WAY
 REDMOND, WA 98052
 UNITED STATES

TITLE

DEMULITPLEXER APPLICATION PROGRAMMING INTERFACE

FILING FEE RECEIVED 1104	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit